## Application for an Express Class IV Well Construction Permit

Commonwealth of Virginia, Department of Health, Virginia Beach Department of Public Health				
Page of HDID Nur	mberMap Reference	Date Received		
	To Be Completed by the Ap	<u>oplicant</u>		
Type of Class IV Well: New Replacement Emergency				
Proposed Use				
Location of Well				
Subdivision Lot	Section	Block		
Directions to Property				
Owner	Address	Phone		

I acknowledge that this permit to construct a Class IV well will be issued without the benefit of a site visit by the local health department prior to the issuance of the construction permit; that the permit is being issued based upon the information provided on the accompanying site plan; that if the well is found not to comply with the minimum separation distances or any other provision of the regulations, the well must be abandoned, and that a variance will not be considered if the improper location of the well is a result of the failure by the owner, his agent, or the well driller to provide complete or accurate information on the site plan submitted with the application or to install the well in accordance with the permit. I give permission to the Health Department to enter onto the property for the purpose of inspecting the property and well during and after its installation until the well is approved by the Department or any abandonment of a well is completed. I have attached a site plan showing the proposed well site, property boundaries, recorded easements, any changes in elevation of greater than 5% on the site, and accurate locations of actual or proposed sources of contamination within 100 feet of the proposed well. I also declare that the under signed well driller will be the contractor that will install the well.

Signature of Owner		Date	
Well Driller	Address	Phone	
Contractor's License Number Well Driller's Signature	(Class B Minimum)		
PERMIT INF The attached site plan submitted by the	FORMATION - PLEASE F		— ded on the
site plan the construction of a Class IV	well in the indicated area is app	roved.	
The well is to be constructed as specifie the Private Well Regulations.	d by the permit (or attached pla	ns and specifications) and in accord	ance with
This Class IV construction permit is nu	all and void if conditions change	from those shown on the permit.	
The well shall not be placed into service inspected, corrections made if necessary by the local health department. Any pouncovered, if necessary, upon the direct	y, and approved by the local heartion of the well system that has	alth department or unless expressly a been covered prior to approval shal	uthorized

This Construction Permit is valid for 90 days from the date of issuance

Date \_\_\_\_\_ Issued by (Sanitarian) \_\_\_\_\_

Date \_\_\_\_\_\_ Reviewed by (Supervisory Sanitarian)